

In a context of rapidly shrinking budgets, understanding both child needs and resource allocation are essential and go hand-in-hand.

A shrinking public purse means that services for children will inevitably be restructured, refocused and ultimately retrenched.

It follows that a thorough analysis of current expenditure is required (how much is spent by what agencies on whom to what end) alongside projections about what expenditure will look like in the short and medium term.

Yet decisions about future resource allocation cannot be meaningfully considered without a comprehensive profile of local need (i.e. where diminishing resources should be directed for the greatest impact).

Therefore robust data on current and future expenditure, allocation of resources and the needs of children and young people go hand-in-hand.

Local authorities have good data on children's needs but it is limited in the degree to which it can inform local investment decisions

In the UK, we have some excellent data at the local authority level. The majority of these data typically come from our health and education systems (see, for example, Child Health Profiles from ChiMat).

However, these local data are limited in their **breadth** (the range of dimensions of children's health, development and influences), **depth** (most data are from those in contact with existing services, not necessarily the wider population) and **granularity** (drilling down to smaller areas or communities is not often possible).

In addition, **outputs** may be inadvertently conflated with **outcomes** (when outputs - such as numbers of children in care or excluded from school - are often a function of the way a local system operates rather than the needs of the population it serves).

The development of tools and technology to effectively and comprehensively measure needs at the local level

The Dartington Social Research Unit (DSRU) has been working with strategic philanthropy and a growing number of progressive local authorities in the UK and US to develop a comprehensive approach to gathering robust data on the wellbeing of children and young people in local areas.

We have been invited by a member of the Association of London Directors of Children's Services (ALDCS) to prepare this proposal describing the approach and present the opportunity for London boroughs to work together to generate state-of-the-art local data to inform commissioning over the coming years.

Data are a means to an end, not an end in themselves

In our experience, decision-makers use data if it is directly from children in their area and they have confidence in it. Our census approach within schools with very high response rates satisfy these criteria.

However, data alone are not sufficient to generate change. Instead, they are one piece of a wider set of information used to make better informed investment decisions.

The DSRU's **ChildrenCount Well-being Surveys** have been designed as one element of a broader strategy development framework called **Evidence2Success**. Other elements include the creation of strong governance arrangements between leaders of public systems and communities, joint accountability between system leaders and communities for outcomes and expenditure, tools to map expenditure, evidence of 'what works' to improve outcomes coupled with science-informed approaches to service design and dashboards to monitor the implementation of strategies and services.

Example of the tools being used in practice: Perth and Kinross

Perth and Kinross Council administered the ChildrenCount 0-8 Survey to 750 parents of young children and the ChildrenCount 9-16 Survey to almost 10,000 children across the local authority.

Data from the ChildrenCount Surveys identified high levels of need and a poor match between existing services and that need. In each place we administer these surveys we find a similar pattern: the red circle in the diagram on this page indicates the average proportion of children with a high level of need, and the black dotted circle the average proportion in contact with targeted services.

The Council then used our Fund-mapping tools to chart current expenditure and identified 1% of total expenditure to be reinvested in evidence-based prevention and early intervention.

The wellbeing data were then used to help prioritise five outcomes for investment, including, for example, reducing early initiation of substance misuse and anxiety and depression in adolescence.

These priorities, and data on local risk and protective factors, helped inform the selection and implementation of a number of evidence-based approaches (such as Incredible Years), alongside some local innovations to be tested, in order to improve outcomes across the authority.

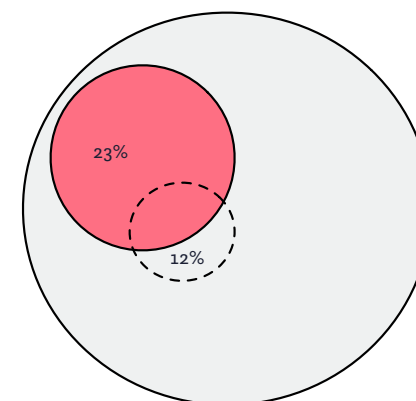


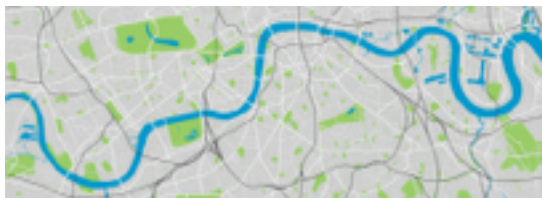
Illustration of data from ChildrenCount Well-being Surveys describing levels of high need (the red circle) and targeted service use (the black dotted circle).

An opportunity for London Boroughs

The DSRU is looking to work with all London boroughs to implement the ChildrenCount Well-being Surveys and create an unparalleled comparative dataset for the capital. We are inviting boroughs to join our early adopter group to initiate the work.

London boroughs have an opportunity to form strategic alliances and clusters in order to maximise both efficiencies in data collection and the impact of the resulting well-being data.

These type of well-being data become more powerful when geographical and statistical neighbours are able to compare local data and potentially co-invest in strategies to improve outcomes across borough boundaries (this is happening to a degree in Tayside, Scotland, for example).



Requirements and considerations

The following points should be considered by those boroughs wishing to undertake a needs analysis using the ChildrenCount Well-being Surveys. We focus here on the ChildrenCount 9-16 school survey as it is a good place to start in building a comprehensive picture of well-being.

- The ChildrenCount Well-being Surveys have a fixed core (to foster comparisons between authorities) as well as some local flexibility for authorities to tailor tools to fit their local context (using a combination of 'bolt-on' tools and bespoke questions).
- Audio options support those who struggle to read or for whom English is not their first language. However, some language translations and testing may be required, which can be accommodated.
- All work is scrutinised by an ethics committee. Best practice requires active child consent for all children, information and opt-out parental consent for primary school children and information only for secondary school pupils.
- Councils may choose to keep surveys completely anonymised but if they wish to understand the degree to which existing services are meeting the needs of the population, identifiable data are required which, alongside robust data security and anonymisation processes, are used to match survey data to service use records.
- A nominated local authority coordinator is required to support school engagement efforts.
- Significant efficiencies in cost can be achieved as more authorities take part, as well as opportunities to share learning and coordination responsibilities.
- Whilst time is required to engage schools and set-up, the data collection window is brief (one month across a borough and two-weeks for individual schools). Analysis and reporting - for the borough and individual schools - is rapid: a matter of weeks.

About the Dartington Social Research Unit (DSRU)

The DSRU is an independent charity that brings science and evidence to bear on policy and practice in children's services to improve the health and development of children and young people. Our team of 26 staff and 15 associates work across our offices in Dartington, Glasgow and London. We shelter the Centre for Social Policy with its membership of over 70 respected, retired academics and policy makers.

Established in 1963, the Unit has a long track record of influencing national policy across social care, health, early years, education and youth justice. Known originally for groundbreaking studies of how these systems operated, over recent decades the Unit has focussed more on advocating for evidence-based prevention and early intervention.

The unit has a strong track record of influencing decision-making within local government, charities and philanthropy.

We seek out forward-looking charities, local authorities and foundations in the UK and internationally willing to test out innovative approaches to research, policy development, service design and implementation that are grounded in science. We then strive to use our successful innovations to achieve impact at scale.

Recent publications and resources of the Unit

Investing in Children: free online database of costs and benefits of evidence-based interventions for children.

Prevention Action: a free online news site that reports internationally on science, innovation, and evidence-based interventions to improve children's health and development.

Scientific journal articles on wellbeing data: We have published extensively on our methods. We have a series of new papers in production. The following are just a few examples based on earlier iterations of the ChildrenCount work:

Axford, N., Hobbs, T., & Jodrell (2013). 'Making child well-being data 'work hard': getting from data to policy and practice'. Child Indicators Research. 6,1, 161-177

Hobbs, T. & Ford, T. (2012). 'How standardized measures can support the implementation of well being programs in schools', Handbook of Implementation Science for Psychology in Education. Cambridge University Press.

Axford, N. & Hobbs, T. (2010) 'Getting the measure of child health and development outcomes (1): a method for use in children's services settings', Child Indicators Research. 4, 59-80.

Hobbs, T. (2010) 'Looking for a Grand View: Introducing concepts of robust sampling to policy makers and practitioners engaged in measuring the well-being of children at the local authority level. International Journal of Social Research Methodology. 13,5, 383-393.

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